



VENKATESHWARA INSTITUTE OF MEDICAL SCIENCES
OFFICE OF THE DEAN ACADEMICS

Email: deanacademics.vims@svu.edu.in (ext - 701)

Dated the 19th of May 2025

NOTICE

Subject: **Submission of PG (MD/MS) Dissertation synopsis**

The PG students admitted to MD/MS Speciality Program/Course for the AY 2024 are hereby informed to submit the synopsis of dissertation to the o/o the Dean, Academics on or before **31.07.2025**. The synopsis will be reviewed by the IRB in the presence of the respective guide. Each PG student shall prepare a short PowerPoint presentation not exceeding 06 slides and present the synopsis within 10 minutes. The schedule for the same shall be intimated in time.

The format of synopsis submission is enclosed.

Dean Academics, VIMS

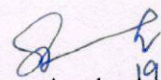
To

All Heads of the Department, VIMS

Encl: as above

Copy to:

1. The Chancellor Secretariat for kind information of Hon'ble Chancellor, SVU
2. The Medical Superintendent, VIMS, for information
3. The Vice Dean (Admin) & (Academics), VIMS for information
4. The Chairperson, IRB, VIMS, for information
5. The Chairperson, PG Cell, VIMS, for information
6. The Coordinator, MEU, VIMS for information
7. IT Head, SVU, to upload the same on the VIMS website
8. Office file – Establishment - GA


19.05.2025
Dean Academics, VIMS

SHRI VENKATESHWARA
UNIVERSITY, GAJRAULA, UP – 244236

PROFORMA FOR REGISTRATION OF MD/MS DISSERTATION

1.	NAME OF THE CANDIDATE AND ADDRESS	
2.	NAME OF THE INSTITUTION	
3.	COURSE OF THE STUDY AND SUBJECT	
4.	DATE OF ADMISSION TO COURSE	
5.	TITLE OF THESIS TOPIC:	
6.	BRIEF RESUME OF THE INTENDED STUDY:	
	6.1 NEED FOR THE STUDY:	Commented [dav1]: Not more than 300 words
	6.2 REVIEW OF LITERATURE:	Commented [dav2]: Not more than 600 words.
	6.3 OBJECTIVES OF THE STUDY:	

7	<p>MATERIALS AND METHODS</p> <p>7.1 SOURCE OF THE DATA</p> <p>7.2 METHOD OF COLLECTION OF DATA</p> <p>INCLUSION CRITERIA:</p> <p>EXCLUSION CRITERIA:</p> <p>7.3 DOES THE STUDY REQUIRE ANY INVESTIGATIONS OR INTERVENTIONS TO BE CONDUCTED IN PATIENTS OR OTHER HUMANS</p> <p>YES/NO</p> <p>7.4 HAS ETHICAL CLEARANCE BEEN OBTAINED FROM YOUR INSTITUTION:</p>	
8.	<p>REFERENCES:</p>	
9.	<p>SIGNATURE OF CANDIDATE</p>	

Commented [dav3]: 1. Vancouver style of referencing to be followed
 2. Should cite at-least 10 indexed print journal articles and not more than 15
 3. A printed copy of the Journal article cited must be kept available

10.	REMARKS OF THE GUIDE:	
11.	11.1 NAME AND DESIGNATION (IN BLOCK LETTERS) OF GUIDE	
	SIGNATURE	
	11.2 CO-GUIDE (if any)	
	SIGNATURE	
	11.3 HEAD OF THE DEPARTMENT	
	11.4 SIGNATURE	

	11.5 REMARKS OF THE CHAIRMAN & PRINCIPAL/DEAN	
	11.6 SIGNATURE	
	11.7 PRINCIPAL/DEAN OF THE INSTITUTION	

Annexure |1|

Commented [dav4]: PATIENT PROFORMA, if any

Annexure |2|

Commented [dav5]: CONSENT FORM